

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):
Harrison, Henry Eartis**Prior Bankruptcy Case Filed Within Last 8 Years** (If more than one, attach additional sheet)Location
Where Filed: - None -

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)Name of Debtor:
- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy Code.

☒ /s/ David S. Yen

November 23, 2005

Signature of Attorney for Debtor(s)

Date

David S. Yen

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No**Certification Concerning Debt Counseling by Individual/Joint Debtor(s)**☒ I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition.☐ I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)**Information Regarding the Debtor (Check the Applicable Boxes)****Venue** (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Statement by a Debtor Who Resides as a Tenant of Residential Property

Check all applicable boxes.

- ☐
- Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)_____
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Harrison, Henry Eartis

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Henry Eartis Harrison
Signature of Debtor Henry Eartis Harrison

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 23, 2005

Date

Signature of Attorney

X /s/ David S. Yen
Signature of Attorney for Debtor(s)

David S. Yen ARDC No. 6194700

Printed Name of Attorney for Debtor(s)

Legal Assistance Foundation of Metropolitan Chicago

Firm Name

111 W. Jackson Blvd, 3rd Floor
Chicago, IL 60604

Address

312-341-1070 Fax: 312-341-1041

Telephone Number

November 23, 2005

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by §1515 of title 11 are attached.

☐ Pursuant to §1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court
Northern District of Illinois

In re Henry Eartis Harrison,
Debtor

Case No. _____

Chapter 13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

| | | | AMOUNTS SCHEDULED | | |
|---|----------------------|------------------|-------------------|-------------|----------|
| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
| A - Real Property | Yes | 1 | 100,000.00 | | |
| B - Personal Property | Yes | 4 | 5,827.43 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 2 | | 60,602.00 | |
| E - Creditors Holding Unsecured Priority Claims | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 2 | | 12,286.09 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 1,739.10 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | 1,081.20 |
| Total Number of Sheets of ALL Schedules | | 15 | | | |
| Total Assets | | | 105,827.43 | | |
| Total Liabilities | | | | 72,888.09 | |

United States Bankruptcy Court
Northern District of Illinois

In re Henry Eartis Harrison,
Debtor

Case No. _____

Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)
[Individual Debtors Only]

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

The foregoing information is for statistical purposes only under 28 U.S.C § 159.

Form B6A
(10/05)

In re Henry Eartis Harrison, Case No. _____
Debtor

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|---|---|------------------------------------|--|-------------------------|
| Property at 1644 E. 84th St., Chicago IL 60617, PIN 20-36-302-035-0000. Value listed not based on a recent appraisal. | | - | 100,000.00 | 58,963.00 |

| | | |
|-------------|------------|----------------------|
| Sub-Total > | 100,000.00 | (Total of this page) |
| Total > | 100,000.00 | |

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

Form B6B
(10/05)

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|---|---|---|
| 1. Cash on hand | | cash | - | 45.00 |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | checking account, Pullman Bank | - | 552.43 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | ordinary and necessary used furniture, appliances. Also, a year old computer (E Machine) | - | 780.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | used books - testbooks, religious books | - | 25.00 |
| | | used books - miscellaneous | - | 25.00 |
| 6. Wearing apparel. | | ordinary and necessary used clothing | - | 150.00 |
| 7. Furs and jewelry. | | costume jewelry bought at second hand store | - | 12.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | term life insurance policy through former employer, Ameritech (now SBC), no cash value | - | 0.00 |
| 10. Annuities. Itemize and name each issuer. | X | | | |

Sub-Total > 1,589.43
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

Form B6B
(10/05)

In re Henry Eartis Harrison,

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | debtor is entitled to receive pension benefits of \$58 and \$29 from two of her former employers. These are defined benefit pensions, debtor cannot cash them out. Debtor's interest in the pension fund is not property of the bankruptcy estate | - | Unknown |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | | accounts receivable from debtor's business, Down Home Gospel Productions. The amount owed is \$1000, from several people or churches, but debtor has very little expectation of being able to collect this money | - | Unknown |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owing debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |

Sub-Total > 0.00
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | | debtor may be entitled to money as an unnamed class member in two class action lawsuits, one against Capital One Bank, and one against Ameritech which became SBC and is now AT&T (again) | - | Unknown |
| | | possible claims under Fair Debt Collection Practices Act and other consumer protection laws | - | Unknown |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | | debtor wrote some gospel and blues songs but they have not been registered and they have been recorded | - | 1.00 |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 1999 Prism | - | 4,225.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |

Sub-Total > 4,226.00
(Total of this page)

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

Form B6B
(10/05)

In re Henry Eartis Harrison, Case No. _____
Debtor

SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 35. Other personal property of any kind not already listed. Itemize. | | Debtor has a web site name reserved, www.downhomegospel.com, but this site is not yet up. Debtor has a temporary web page on a friend's web site | - | 12.00 |

Sub-Total > 12.00
(Total of this page)
Total > 5,827.43
(Report also on Summary of Schedules)

Sheet 3 of 3 continuation sheets attached
to the Schedule of Personal Property

Form B6C
(10/05)

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--|----------------------------|---|
| <u>Real Property</u> | | | |
| Property at 1644 E. 84th St., Chicago IL 60617, PIN 20-36-302-035-0000. Value listed not based on a recent appraisal. | 735 ILCS 5/12-901 | 7,500.00 | 100,000.00 |
| <u>Cash on Hand</u> | | | |
| cash | 735 ILCS 5/12-1001(b) | 45.00 | 45.00 |
| <u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u> | | | |
| checking account, Pullman Bank | 735 ILCS 5/12-1001(g)(1) | 100% | 552.43 |
| <u>Household Goods and Furnishings</u> | | | |
| ordinary and necessary used furniture, appliances. Also, a year old computer (E Machine) | 735 ILCS 5/12-1001(b) | 780.00 | 780.00 |
| <u>Books, Pictures and Other Art Objects; Collectibles</u> | | | |
| used books - testbooks, religious books | 735 ILCS 5/12-1001(a) | 25.00 | 25.00 |
| used books - miscellaneous | 735 ILCS 5/12-1001(b) | 25.00 | 25.00 |
| <u>Wearing Apparel</u> | | | |
| ordinary and necessary used clothing | 735 ILCS 5/12-1001(a) | 100% | 150.00 |
| <u>Furs and Jewelry</u> | | | |
| costume jewelry bought at second hand store | 735 ILCS 5/12-1001(a) | 100% | 12.00 |
| <u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u> | | | |
| debtor is entitled to receive pension benefits of \$58 and \$29 from two of her former employers. These are defined benefit pensions, debtor cannot cash them out. Debtor's interest in the pension fund is not property of the bankruptcy estate | 735 ILCS 5/12-1006 | 100% | Unknown |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u> | | | |
| 1999 Prism | 735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b) | 1,200.00 1,000.00 | 4,225.00 |
| <u>Other Personal Property of Any Kind Not Already Listed</u> | | | |
| Debtor has a web site name reserved, www.downhomegospel.com, but this site is not yet up. Debtor has a temporary web page on a friend's web site | 735 ILCS 5/12-1001(b) | 12.00 | 12.00 |

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|---|--|--|--------------------------------------|--|---------------------------------|
| | | H W J C | | | | | |
| Account No. | | | | | | | |
| City of Chicago, Dept of Water 333 S. State, Suite LL10 P.O. Box 6330 Chicago, IL 60604-3979 | - | Property at 1644 E. 84th St., Chicago IL 60617, PIN 20-36-302-035-0000. Value listed not based on a recent appraisal. | | | | | |
| Value \$ | | 100,000.00 | | | | 400.00 | 0.00 |
| Account No. | | | | | | | |
| GMAC PO Box 217060 Auburn Hills, MI 48321 | - | 1999 PMSI in personal property 1999 Prism | | | | | |
| Value \$ | | 4,225.00 | | | | 1,639.00 | 0.00 |
| Account No. 47960907 | | | | | | | |
| Midland Mortgage Company P.O. Box 26648 Oklahoma City, OK 73126 | - | Property at 1644 E. 84th St., Chicago IL 60617, PIN 20-36-302-035-0000. Value listed not based on a recent appraisal. | | | | | |
| Value \$ | | 100,000.00 | | | | 45,388.00 | 0.00 |
| Account No. | | | | | | | |
| Representing: Midland Mortgage Company | | Midland Mortgage Company Delinquency Assistance Center PO Box 18187 Oklahoma City, OK 73154 | | | | | |
| Value \$ | | | | | | | |
| Subtotal (Total of this page) | | | | | | 47,427.00 | |

1 continuation sheets attached

Form B6D - Cont.
(10/05)

In re Henry Eartis Harrison,
Debtor

Case No. _____

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--|------------------|--|--|--|--------------------------------------|--|---------------------------------|
| | | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | | | | |
| Account No. 92 M1 146738 | | | 1992, revived 200 | | | | | |
| Nicom Credit Union f/k/a UNITE Bell Credit Union Schaumburg, IL 60194 | | - | Judgment Lien Property at 1644 E. 84th St., Chicago IL 60617, PIN 20-36-302-035-0000. Value listed not based on a recent appraisal. | | | | | |
| | | | Value \$ 100,000.00 | | | | 13,175.00 | 0.00 |
| Account No. | | | Walinski & Trunkett | | | | | |
| Representing: Nicom Credit Union | | | 25 E. Washington, Suite 1221 Chicago, IL 60602 | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |

Sheet 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

Subtotal
(Total of this page)

13,175.00

Total
(Report on Summary of Schedules)

60,602.00

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

Form B6F
(10/05)

In re Henry Eartis Harrison,
Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. 5291-1520-3983-1918 Capital One Bank 11011 W. Broad Street Glen Allen, VA 23060 | - | 2005-M1-125839 | | | X | 5,624.09 |
| Account No. Representing: Capital One Bank | | Blitt and Gaines, PC 318 W. Adams St, Suite 1600 Chicago, IL 60606 | | | | |
| Account No. Cingular Wireless 5655 Glenridge Connector Atlanta, GA 30342 | - | Debtor was sent a Cingular cell phone as part of a promotion/benefit for retired employees of SBC/AT&T. She was told she had to pay for it, then that she didn't have to pay for it, but is still being dunned by collection agency | | | X | Unknown |
| Account No. Representing: Cingular Wireless | | NCO Financial P.O. Box 7627 Ft. Washington, PA 19034 | | | | |
| Subtotal (Total of this page) | | | | | | 5,624.09 |

1 continuation sheets attached

Form B6F - Cont.
(10/05)

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D W I F E J O I N T O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|--|---|--|--|--------------------------------------|----------------------------------|
| | | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. 4614626401 | | | | | | | |
| HSBC CARSON'S PO BOX 3608 OAK BROOK, IL 60522-3608 | | - | | | | X | 224.00 |
| Account No. 4465-6995-0203-1114 | | | Providian account | | | | |
| LVNV FUNDING LLC PO BOX 10497 Greenville, SC 29603-0584 | | - | | | | X | 6,283.00 |
| Account No. | | | Redline Recovery Services LLC 6464 Savoy Drive, 4th Floor Houston, TX 77036 | | | | |
| Representing: LVNV FUNDING LLC | | | | | | | |
| Account No. | | | | | | | |
| Med1ACL Laboratories c/o State Collections Service PO Box 6250 Madison, WI 53701 | | - | | | | X | 155.00 |
| Account No. | | | | | | | |
| | | | | | | | |
| Sheet no. <u>1</u> of <u>1</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) |
| | | | | | | | 6,662.00 |
| (Report on Summary of Schedules) | | | | | | | Total 12,286.09 |

In re Henry Eartis Harrison

Case No. _____

Debtor

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

In re Henry Eartis Harrison, Case No. _____
Debtor

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

In re Henry Eartis Harrison

Case No.

Debtor(s)

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| | | |
|--------------------------|---------------------------------|--------|
| Debtor's Marital Status: | DEPENDENTS OF DEBTOR AND SPOUSE | |
| Divorced | RELATIONSHIP: None. | AGE: |
| Employment: | DEBTOR | SPOUSE |
| Occupation | retired | |
| Name of Employer | n/a | |
| How long employed | | |
| Address of Employer | | |

INCOME: (Estimate of average monthly income)

1. Current monthly gross wages, salary, and commissions (Prorate if not paid monthly.)

| | DEBTOR | SPOUSE |
|----|---------|--------|
| 1. | \$ 0.00 | \$ N/A |

2. Estimate monthly overtime

| | | |
|----|---------|--------|
| 2. | \$ 0.00 | \$ N/A |
|----|---------|--------|

3. SUBTOTAL

| | | |
|----|---------|--------|
| 3. | \$ 0.00 | \$ N/A |
|----|---------|--------|

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

| | | |
|----|---------|--------|
| a. | \$ 0.00 | \$ N/A |
|----|---------|--------|

b. Insurance

| | | |
|----|---------|--------|
| b. | \$ 0.00 | \$ N/A |
|----|---------|--------|

c. Union dues

| | | |
|----|---------|--------|
| c. | \$ 0.00 | \$ N/A |
|----|---------|--------|

d. Other (Specify):

| | | |
|----|---------|--------|
| d. | \$ 0.00 | \$ N/A |
|----|---------|--------|

| | | |
|--|---------|--------|
| | \$ 0.00 | \$ N/A |
|--|---------|--------|

5. SUBTOTAL OF PAYROLL DEDUCTIONS

| | | |
|----|---------|--------|
| 5. | \$ 0.00 | \$ N/A |
|----|---------|--------|

6. TOTAL NET MONTHLY TAKE HOME PAY

| | | |
|----|---------|--------|
| 6. | \$ 0.00 | \$ N/A |
|----|---------|--------|

7. Regular income from operation of business or profession or farm. (Attach detailed statement)

| | | |
|----|---------|--------|
| 7. | \$ 0.00 | \$ N/A |
|----|---------|--------|

8. Income from real property

| | | |
|----|---------|--------|
| 8. | \$ 0.00 | \$ N/A |
|----|---------|--------|

9. Interest and dividends

| | | |
|----|---------|--------|
| 9. | \$ 0.00 | \$ N/A |
|----|---------|--------|

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

| | | |
|-----|---------|--------|
| 10. | \$ 0.00 | \$ N/A |
|-----|---------|--------|

11. Social security or other government assistance

(Specify): Social security

| | | |
|-----|-------------|--------|
| 11. | \$ 1,153.00 | \$ N/A |
|-----|-------------|--------|

| | | |
|--|---------|--------|
| | \$ 0.00 | \$ N/A |
|--|---------|--------|

12. Pension or retirement income

| | | |
|-----|----------|--------|
| 12. | \$ 86.10 | \$ N/A |
|-----|----------|--------|

13. Other monthly income

(Specify): Contributions from son

| | | |
|-----|-----------|--------|
| 13. | \$ 500.00 | \$ N/A |
|-----|-----------|--------|

| | | |
|--|---------|--------|
| | \$ 0.00 | \$ N/A |
|--|---------|--------|

14. SUBTOTAL OF LINES 7 THROUGH 13

| | | |
|-----|-------------|--------|
| 14. | \$ 1,739.10 | \$ N/A |
|-----|-------------|--------|

15. TOTAL MONTHLY INCOME (Add amounts shown on lines 6 and 14)

| | | |
|-----|-------------|--------|
| 15. | \$ 1,739.10 | \$ N/A |
|-----|-------------|--------|

16. TOTAL COMBINED MONTHLY INCOME: \$ 1,739.10

(Report also on Summary of Schedules)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
Line 13 refers to contributions from debtor's son, which will start in December 2005 or January 2006. Before that debtor was not regularly receiving contributions from her son.

Form B6J
(10/05)

In re Henry Eartis Harrison

Debtor(s)

Case No. _____

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| | | |
|--|----|-----------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | <u>575.00</u> |
| a. Are real estate taxes included? Yes <u>X</u> No ____ | | |
| b. Is property insurance included? Yes <u>X</u> No ____ | | |
| 2. Utilities: | | |
| a. Electricity and heating fuel | \$ | <u>200.00</u> |
| b. Water and sewer | \$ | <u>30.00</u> |
| c. Telephone | \$ | <u>5.00</u> |
| d. Other <u>Internet</u> | \$ | <u>26.00</u> |
| 3. Home maintenance (repairs and upkeep) | \$ | <u>10.00</u> |
| 4. Food | \$ | <u>60.00</u> |
| 5. Clothing | \$ | <u>5.00</u> |
| 6. Laundry and dry cleaning | \$ | <u>5.00</u> |
| 7. Medical and dental expenses | \$ | <u>0.00</u> |
| 8. Transportation (not including car payments) | \$ | <u>20.00</u> |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | <u>0.00</u> |
| 10. Charitable contributions | \$ | <u>0.00</u> |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | <u>0.00</u> |
| b. Life | \$ | <u>0.00</u> |
| c. Health | \$ | <u>78.20</u> |
| d. Auto | \$ | <u>67.00</u> |
| e. Other _____ | \$ | <u>0.00</u> |
| 12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____ | \$ | <u>0.00</u> |
| 13. Installment payments: (In chapter 11, 12 and 13 cases, do not list payments to be included in the plan.) | | |
| a. Auto | \$ | <u>0.00</u> |
| b. Other _____ | \$ | <u>0.00</u> |
| c. Other _____ | \$ | <u>0.00</u> |
| d. Other _____ | \$ | <u>0.00</u> |
| 14. Alimony, maintenance, and support paid to others | \$ | <u>0.00</u> |
| 15. Payments for support of additional dependents not living at your home | \$ | <u>0.00</u> |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | <u>0.00</u> |
| 17. Other _____ | \$ | <u>0.00</u> |
| Other _____ | \$ | <u>0.00</u> |
| 18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules) | \$ | <u>1,081.20</u> |

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

| | | |
|--|----|-----------------|
| a. Total monthly income from Line 16 of Schedule I | \$ | <u>1,739.10</u> |
| b. Total monthly expenses from Line 18 above | \$ | <u>1,081.20</u> |
| c. Monthly net income (a. minus b.) | \$ | <u>657.90</u> |

Official Form 6-Decl.
(10/05)

**United States Bankruptcy Court
Northern District of Illinois**

In re Henry Eartis Harrison

Debtor(s)

Case No. _____

Chapter 13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 17 sheets *[total shown on summary page plus 2]*, and that they are true and correct to the best of my knowledge, information, and belief.

Date November 23, 2005

Signature /s/ Henry Eartis Harrison

Henry Eartis Harrison
Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

Document Page 22 of 33
United States Bankruptcy Court
Northern District of Illinois

In re Henry Eartis Harrison

Debtor(s)

Case No.

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|--|----|------|
| For legal services, I have agreed to accept..... | \$ | 0.00 |
| Prior to the filing of this statement I have received..... | \$ | 0.00 |
| Balance Due..... | \$ | 0.00 |

2. \$ 0.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): Attorney's normal salary from LAFMC

4. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify): Attorney's normal salary from LAFMC

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Evicting any tenants of debtor. If requested LAFMC may represent debtor in non-bankruptcy matters according to LAFMC priority guidelines, however, this requires a separate decision.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: November 23, 2005/s/ David S. Yen

David S. Yen

Legal Assistance Foundation of Metropolitan Chicago

111 W. Jackson Blvd, 3rd Floor

Chicago, IL 60604

312-341-1070 Fax: 312-341-1041

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$220 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$274)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$150 filing fee, \$39 administrative fee: Total fee \$189)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

David S. Yen
Printed Name of Attorney
Address:
111 W. Jackson Blvd, 3rd Floor
Chicago, IL 60604
312-341-1070

X /s/ David S. Yen November 23, 2005
Signature of Attorney Date

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Henry Eartis Harrison
Printed Name(s) of Debtor(s)

Case No. (if known) _____

X /s/ Henry Eartis Harrison November 23, 2005
Signature of Debtor Date

X _____
Signature of Joint Debtor (if any) Date

**United States Bankruptcy Court
Northern District of Illinois**

In re Henry Eartis Harrison Case No. _____
Debtor(s) Chapter 13

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 16

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: November 23, 2005 /s/ Henry Eartis Harrison
Henry Eartis Harrison
Signature of Debtor

Henry Eartis Harrison
1644 E. 84th St.
Chicago, IL 60617

David S. Yen
Legal Assistance Foundation of Metropolitan Chicago
111 W. Jackson Blvd, 3rd Floor
Chicago, IL 60604

Blitt and Gaines, PC
318 W. Adams St, Suite 1600
Chicago, IL 60606

Capital One Bank
Acct No 5291-1520-3983-1918
11011 W. Broad Street
Glen Allen, VA 23060

Cingular Wireless
5655 Glenridge Connector
Atlanta, GA 30342

City of Chicago, Dept of Water
333 S. State, Suite LL10
P.O. Box 6330
Chicago, IL 60604-3979

GMAC
PO Box 217060
Auburn Hills, MI 48321

HSBC CARSON'S
Acct No 4614626401
PO BOX 3608
OAK BROOK, IL 60522-3608

LVNV FUNDING LLC
Acct No 4465-6995-0203-1114
PO BOX 10497
Greenville, SC 29603-0584

MedlACL Laboratories
c/o State Collections Service
PO Box 6250
Madison, WI 53701

Midland Mortgage Company
Acct No 47960907
P.O. Box 26648
Oklahoma City, OK 73126

Midland Mortgage Company
Delinquency Assistance Center
PO Box 18187
Oklahoma City, OK 73154

NCO Financial
P.O. Box 7627
Ft. Washington, PA 19034

Nicom Credit Union
Acct No 92 M1 146738
f/k/a UNITE Bell Credit Union
Schaumburg, IL 60194

Redline Recovery Services LLC
6464 Savoy Drive, 4th Floor
Houston, TX 77036

Walinski & Trunkett
25 E. Washington, Suite 1221
Chicago, IL 60602

Form B22C (Chapter 13) (10/05)

In re Henry Eartis Harrison
Debtor(s)
Case Number: _____
(If known)

According to the calculations required by this statement:
☒ The applicable commitment period is 3 years.
☐ The applicable commitment period is 5 years.
☐ Disposable income is determined under § 1325(b)(3).
☒ Disposable income is not determined under § 1325(b)(3).
 (Check the box as directed in Lines 17 and 23 of this statement.)

STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME FOR USE IN CHAPTER 13

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| Part I. REPORT OF INCOME | | | | | | |
|--------------------------|---|---|-----------------------------|-----------|--------------------------------|--------------------------------|
| 1 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input checked="" type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input type="checkbox"/> Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10. All figures must reflect average monthly income for the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If you received different amounts of income during these six months, you must total the amounts received during the six months, divide this total by six, and enter the result on the appropriate line. | | | | Column A Debtor's Income | Column B Spouse's Income |
| 2 | Gross wages, salary, tips, bonuses, overtime, commissions. | | | | \$ 0.00 | \$ |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference on Line 3. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. | | | | | |
| | Debtor | | Spouse | | | |
| | a. | Gross receipts | \$ 0.00 | \$ | | |
| | b. | Ordinary and necessary business expenses | \$ 0.00 | \$ | | |
| | c. | Business income | Subtract Line b from Line a | | \$ 0.00 | \$ |
| 4 | Rents and other real property income. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. | | | | | |
| | Debtor | | Spouse | | | |
| | a. | Gross receipts | \$ 0.00 | \$ | | |
| | b. | Ordinary and necessary operating expenses | \$ 0.00 | \$ | | |
| | c. | Rental income | Subtract Line b from Line a | | \$ 0.00 | \$ |
| 5 | Interest, dividends, and royalties. | | | | \$ 0.00 | \$ |
| 6 | Pension and retirement income. | | | | \$ 0.00 | \$ |
| 7 | Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed. | | | | \$ 0.00 | \$ |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act | | Debtor \$ 0.00 | Spouse \$ | \$ 0.00 | \$ |
| 9 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. | | | | | |
| | Debtor | | Spouse | | | |
| | a. | social security income does | \$ 0.00 | \$ | | |
| | b. | not count for CMI purposes | \$ 0.00 | \$ | \$ 0.00 | \$ |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). | | | | \$ 0.00 | \$ |
| 11 | Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A. | | | | \$ | 0.00 |

| Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD | | |
|---|---|--------------|
| 12 | Enter the amount from Line 11 | \$ 0.00 |
| 13 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter the amount of the income listed in Line 10, Column B that was NOT regularly contributed to the household expenses of you or your dependents. Otherwise, enter zero. | \$ 0.00 |
| 14 | Subtract Line 13 from Line 12 and enter the result. | \$ 0.00 |
| 15 | Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result. | \$ 0.00 |
| 16 | Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>IL</u> b. Enter debtor's household size: <u>1</u> | \$ 41,602.00 |
| 17 | Application of § 1325(b)(4). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts III, IV, V or VI. <input type="checkbox"/> The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with Part III of this statement. | |
| Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME | | |
| 18 | Enter the amount from Line 11. | \$ |
| 19 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter the amount of the income listed in Line 10, Column B that was NOT regularly contributed to the household expenses of you or your dependents. If you are unmarried or married and filing jointly with your spouse, enter zero. | \$ |
| 20 | Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result. | \$ |
| 21 | Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result. | \$ |
| 22 | Applicable median family income. Enter the amount from Line 16. | \$ |
| 23 | Application of § 1325(b)(3). Check the applicable box and proceed as directed. <input type="checkbox"/> The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. <input type="checkbox"/> The amount on Line 21 is less than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI. | |
| Part IV. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2) | | |
| Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | |
| 24 | National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ |
| 25A | Local Standards: housing and utilities; non-mortgage expenses. Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ |

Form B22C (Chapter 13) (10/05)

| | | | | | | | | | | | |
|-----|--|------------------------------|--|----|----|--|----|----|---|------------------------------|----|
| 25B | <p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Housing and Utilities Standards; mortgage/rental Expense</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Housing and Utilities Standards; mortgage/rental Expense | \$ | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 | \$ | c. | Net mortgage/rental expense | Subtract Line b from Line a. | \$ |
| a. | IRS Housing and Utilities Standards; mortgage/rental Expense | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 | \$ | | | | | | | | | |
| c. | Net mortgage/rental expense | Subtract Line b from Line a. | | | | | | | | | |
| 26 | <p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> | \$ | | | | | | | | | |
| 27 | <p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.</p> <p><input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> | \$ | | | | | | | | | |
| 28 | <p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, First Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs, First Car | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 | \$ | c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ |
| a. | IRS Transportation Standards, Ownership Costs, First Car | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | | | | | | | | | |
| 29 | <p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, Second Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 | \$ | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$ |
| a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | | | | | | | | | |
| 30 | <p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p> | \$ | | | | | | | | | |
| 31 | <p>Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</p> | \$ | | | | | | | | | |

Form B22C (Chapter 13) (10/05)

| | | | | | | | | | | | | | | | |
|--|--|------------------------------|----|------------------|----|----|----------------------|----|----|------------------------|----|--|--|------------------------------|----|
| 32 | Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | \$ | | | | | | | | | | | | |
| 33 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in line 49. | | \$ | | | | | | | | | | | | |
| 34 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | \$ | | | | | | | | | | | | |
| 35 | Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare. Do not include payments made for children's education. | | \$ | | | | | | | | | | | | |
| 36 | Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 39. | | \$ | | | | | | | | | | | | |
| 37 | Other Necessary Expenses: telecommunication services. Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance, or internet services necessary for the health and welfare of you or your dependents. Do not include any amount previously deducted. | | \$ | | | | | | | | | | | | |
| 38 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. | | \$ | | | | | | | | | | | | |
| Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 | | | | | | | | | | | | | | | |
| 39 | <p>Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the average monthly amounts that you actually expend in each of the following categories and enter the total.</p> <table border="1"> <tr> <td>a.</td> <td>Health Insurance</td> <td>\$</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$</td> </tr> <tr> <td colspan="2"></td> <td>Total: Add Lines a, b, and c</td> </tr> </table> | | a. | Health Insurance | \$ | b. | Disability Insurance | \$ | c. | Health Savings Account | \$ | | | Total: Add Lines a, b, and c | \$ |
| a. | Health Insurance | \$ | | | | | | | | | | | | | |
| b. | Disability Insurance | \$ | | | | | | | | | | | | | |
| c. | Health Savings Account | \$ | | | | | | | | | | | | | |
| | | Total: Add Lines a, b, and c | | | | | | | | | | | | | |
| 40 | Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. | | \$ | | | | | | | | | | | | |
| 41 | Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. | | \$ | | | | | | | | | | | | |
| 42 | Home energy costs in excess of the allowance specified by the IRS Local Standards. Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. | | \$ | | | | | | | | | | | | |
| 43 | Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | \$ | | | | | | | | | | | | |
| 44 | Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. | | \$ | | | | | | | | | | | | |
| 45 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | | \$ | | | | | | | | | | | | |
| 46 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45. | | \$ | | | | | | | | | | | | |

| Subpart C: Deductions for Debt Payment | | | | | | | | | | | | | | | | | | | |
|---|---|---------------------------------------|---------------------------|--|---------------------------------------|---------------------------|--|---|----|---|-------------------------------|----|--|--|--|--|--|------------------|----|
| 47 | <p>Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 35%;">60-month Average Payment</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines</td> </tr> </tbody> </table> | | | Name of Creditor | Property Securing the Debt | 60-month Average Payment | a. | | | \$ | | | | | | | | Total: Add Lines | \$ |
| | Name of Creditor | Property Securing the Debt | 60-month Average Payment | | | | | | | | | | | | | | | | |
| a. | | | \$ | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | Total: Add Lines | | | | | | | | | | | | | | | | |
| 48 | <p>Past due payments on secured claims. If any of the debts listed in Line 47 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt in Default</th> <th style="width: 35%;">1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines</td> </tr> </tbody> </table> | | | Name of Creditor | Property Securing the Debt in Default | 1/60th of the Cure Amount | a. | | | \$ | | | | | | | | Total: Add Lines | \$ |
| | Name of Creditor | Property Securing the Debt in Default | 1/60th of the Cure Amount | | | | | | | | | | | | | | | | |
| a. | | | \$ | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | Total: Add Lines | | | | | | | | | | | | | | | | |
| 49 | <p>Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.</p> | | \$ | | | | | | | | | | | | | | | | |
| 50 | <p>Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 35%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td style="text-align: center;">x</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td style="text-align: right;">Total: Multiply Lines a and b</td> </tr> </tbody> </table> | | a. | Projected average monthly Chapter 13 plan payment. | \$ | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | x | c. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | \$ | | | | | | | |
| a. | Projected average monthly Chapter 13 plan payment. | \$ | | | | | | | | | | | | | | | | | |
| b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | x | | | | | | | | | | | | | | | | | |
| c. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | | | | | | | | | | | | | | | | | |
| 51 | <p>Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.</p> | | \$ | | | | | | | | | | | | | | | | |
| Subpart D: Total Deductions Allowed under § 707(b)(2) | | | | | | | | | | | | | | | | | | | |
| 52 | <p>Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 38, 46, and 51.</p> | | \$ | | | | | | | | | | | | | | | | |

| Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2) | | |
|---|--|----|
| 53 | <p>Total current monthly income. Enter the amount from Line 20.</p> | \$ |
| 54 | <p>Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, included in Line 7, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.</p> | \$ |
| 55 | <p>Qualified retirement deductions. Enter the monthly average of (a) all contributions or wage deductions made to qualified retirement plans, as specified in § 541(b)(7) and (b) all repayments of loans from retirement plans, as specified in § 362(b)(19).</p> | \$ |
| 56 | <p>Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.</p> | \$ |
| 57 | <p>Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, and 56 and enter the result.</p> | \$ |
| 58 | <p>Monthly Disposable Income Under § 1325(b)(2). Subtract Line 57 from Line 53 and enter the result.</p> | \$ |

Part VI. ADDITIONAL EXPENSE CLAIMS

| | | |
|--------------------------------|--|----------------|
| 59 | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. | |
| | Expense Description | Monthly Amount |
| | a. | \$ |
| | b. | \$ |
| | c. | \$ |
| | d. | \$ |
| Total: Add Lines a, b, c and d | | \$ |

Part VII. VERIFICATION

| | | |
|----|---|--|
| 60 | I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this is a joint case, both debtors must sign.)</i> | |
| | Date: <u>November 23, 2005</u> | Signature: <u>/s/ Henry Eartis Harrison</u> Henry Eartis Harrison (Debtor) |